

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 10  
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> <b>HUCKABEE FOR PRESIDENT, INC.</b>		<b>2. IDENTIFICATION NUMBER</b> C00431809	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported C/O JPMS Cox, PLLC 11300 Cantrell Road, Suite 301			
<b>CITY, STATE, and ZIP CODE</b> Little Rock                      AR                      72212		<b>3. IS THIS REPORT FOR :</b> <input type="checkbox"/> Primary <input type="checkbox"/> General	

**4. TYPE OF REPORT** (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input checked="" type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
    election on \_\_\_\_\_ in the State of \_\_\_\_\_

☐ Thirtieth day report following the General Election on \_\_\_\_\_  
    on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT    ☐ YES    ☒ NO

5. COVERING PERIOD	FROM 06/01/2008	THROUGH 06/30/2008
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<b>SUMMARY</b>	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD .....	39071.06
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) .....	21406.65
	8. SUBTOTAL (Lines 6 and 7) .....	60477.71
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	1861.44
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) .....	58616.27
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	112735.63
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	121109.35
	13. EXPENDITURES SUBJECT TO LIMITATION .....	16016470.42
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	16061823.97
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....	16016470.42

**I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.**

Type or Print Name of Treasurer <b>Mr. Bryan Jeffrey</b>	Date 07/18/2008
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Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b>	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	<b>FEC FORM 3P</b> <b>(01/2001)</b>
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**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 10**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**HUCKABEE FOR PRESIDENT, INC.**

Report Covering the Period

From: 06/01/2008

To: 06/30/2008

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	0.00	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees .....	10.00	16066083.71	
(b) Political Party Committees .....	0.00	15500.00	
(c) Other Political Committees .....	0.00	59423.43	
(d) The Candidate .....	0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) .....	10.00	16141007.14	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00	
(b) Other Loans .....	0.00	0.00	
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	0.00	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating .....	21396.65	274618.58	
(b) Fundraising .....	0.00	0.00	
(c) Legal and Accounting .....	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	21396.65	274618.58	
21. OTHER RECEIPTS (Dividend, Interest, etc.) .....	0.00	13662.72	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....	21406.65	16429288.44	
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES .....	1861.44	16291089.00	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00	
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS .....	0.00	0.00	
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate .....	0.00	0.00	
(b) Other Repayments .....	0.00	0.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) .....	0.00	0.00	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees .....	0.00	74183.17	
(b) Political Party Committees .....	0.00	0.00	
(c) Other Political Committees .....	0.00	5000.00	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....	0.00	79183.17	
29. OTHER DISBURSEMENTS .....	0.00	400.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	1861.44	16370672.17	
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00		

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

3 / 10

**1. NAME OF COMMITTEE (in full)****HUCKABEE FOR PRESIDENT, INC.****ADDRESS (number and street)**C/O JPMS Cox, PLLC  
11300 Cantrell Road, Suite 301**CITY, STATE, and ZIP CODE**

Little Rock AR 72212

**2. IDENTIFICATION NUMBER**

C00431809

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 4 / 10

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) CBS News Mailing Address 524 W. 57th Street City State Zip Code New York NY 10019 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 16191.65	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 4 / 2 0 0 8 Amount of Each Receipt this Period 16191.65 Press Travel Reimbursement Transaction ID: SA20A.274241
<b>B.</b> Full Name (Last, First, Middle Initial) Fox News Mailing Address 400 N. Capitol Street NE City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4830.00	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 4 / 2 0 0 8 Amount of Each Receipt this Period 4830.00 Press Travel Reimbursement Transaction ID: SA20A.274242
<b>C.</b> Full Name (Last, First, Middle Initial) Oce Imagistics Inc. Mailing Address P.O. Box 11407 City State Zip Code Birmingham AL 35246-0284 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 375.00	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 8 Amount of Each Receipt this Period 375.00 Refund Transaction ID: SA20A.274240

**SUBTOTAL** of Receipts This Page (optional) .....

21396.65

**TOTAL** This Period (last page this line number only) .....

21396.65

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 / 10

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
HUCKABEE FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) Alexander's Fine Portrait Design	<b>Transaction ID:</b> SB23.274253 <b>Date of Disbursement</b>																				
Mailing Address 312 Birdsall	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	6		2	0	0	8												
City Houston State TX Zip Code 77007	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Event Photography Candidate Name	<table border="1"> <tr> <td colspan="10">110.00</td> </tr> </table>	110.00																			
110.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Apptix, Inc.	<b>Transaction ID:</b> SB23.274248 <b>Date of Disbursement</b>																				
Mailing Address 8000 Peter Road, Suite A-100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	2		2	0	0	8												
City Fort Lauderdale State FL Zip Code 33324	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Blackberry Rental and Service Charge Candidate Name	<table border="1"> <tr> <td colspan="10">146.26</td> </tr> </table>	146.26																			
146.26																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Huckaby, Davis, Lisker	<b>Transaction ID:</b> SB23.274251 <b>Date of Disbursement</b>																				
Mailing Address 228 South Washington Street Suite 115	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	5		2	0	0	8												
City Alexandria State VA Zip Code 22314	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting Compliance Candidate Name	<table border="1"> <tr> <td colspan="10">127.10</td> </tr> </table>	127.10																			
127.10																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**383.36**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
HUCKABEE FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) Incredibly Edible Catering	<b>Transaction ID:</b> SB23.274254 <b>Date of Disbursement</b>																				
Mailing Address 1321 Sligh Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	2		2	0	0	8												
City Orlando State FL Zip Code 32806	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Event Catering	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>735.88</td> </tr> </table>																				735.88
									735.88												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Metro	<b>Transaction ID:</b> SB23.274250 <b>Date of Disbursement</b>																				
Mailing Address 124 W. Capitol	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	5		2	0	0	8												
City Little Rock State AR Zip Code 72201	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>167.48</td> </tr> </table>																				167.48
									167.48												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex, Inc.	<b>Transaction ID:</b> SB23.274247 <b>Date of Disbursement</b>																				
Mailing Address 12921 Cantrell Road Suite 100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	5		2	0	0	8												
City Little Rock State AR Zip Code 72223	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll Processing Fee	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>39.00</td> </tr> </table>																				39.00
									39.00												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**942.36**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 10

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
HUCKABEE FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.	<b>Transaction ID:</b> SB23.274244 <b>Date of Disbursement</b>
Mailing Address 4100 Solutions Center #774100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60677	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit Card Processing Fee	<div>409.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.	<b>Transaction ID:</b> SB23.274249 <b>Date of Disbursement</b>
Mailing Address 4100 Solutions Center #774100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 1 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60677	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit Card Processing Fee	<div>10.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.	<b>Transaction ID:</b> SB23.274243 <b>Date of Disbursement</b>
Mailing Address 4100 Solutions Center #774100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60677	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit Card Processing Fee	<div>116.22</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

535.72

**TOTAL** This Period (last page this line number only) .....

1861.44

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☒ 11  
☐ 12NAME OF COMMITTEE (In Full)  
HUCKABEE FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ABC NewsNature of Debt (Purpose):  
Press Travel Reimbursement

Mailing Address 917 Indian Creek Lane

City State ZIP Code  
Crownsville MD 21032

Outstanding Balance Beginning This Period

833.82

Transaction ID: SD11.274166

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

833.82

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CBS NewsNature of Debt (Purpose):  
Press Travel Reimbursement

Mailing Address 524 W. 57th Street

City State ZIP Code  
New York NY 10019

Outstanding Balance Beginning This Period

16191.65

Transaction ID: SD11.273967

Amount Incurred This Period

0.00

Payment This Period

16191.65

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CNNNature of Debt (Purpose):  
Press Travel Reimbursement

Mailing Address One CNN Center

City State ZIP Code  
Atlanta GA 30303

Outstanding Balance Beginning This Period

6229.15

Transaction ID: SD11.208560

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6229.15

**1) SUBTOTALS** This Period This Page (optional).....

7062.97

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☒ 11  
☐ 12NAME OF COMMITTEE (In Full)  
HUCKABEE FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Fox NewsNature of Debt (Purpose):  
Press Travel Reimbursement

Mailing Address 400 N. Capitol Street NE

City State ZIP Code  
Washington DC 20001

Outstanding Balance Beginning This Period

4830.00

Transaction ID: SD11.274167

Amount Incurred This Period

0.00

Payment This Period

4830.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NBC News & National Journal GroupNature of Debt (Purpose):  
Press Travel Reimbursement

Mailing Address 30 Rockefeller Center

City State ZIP Code  
New York NY 10112

Outstanding Balance Beginning This Period

672.66

Transaction ID: SD11.273966

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

672.66

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Preferred CommunicationsNature of Debt (Purpose):  
Direct Mail List Inc.- Fa-  
ir Market Value

Mailing Address 6090-D Franconia Road

City State ZIP Code  
Alexandria VA 22310

Outstanding Balance Beginning This Period

105000.00

Transaction ID: SD11.274239

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

105000.00

1) **SUBTOTALS** This Period This Page (optional).....

105672.66

2) **TOTALS** This Period (last page this line number only).....

112735.63

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

112735.63

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
HUCKABEE FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Holtzman Vogel, PLLCNature of Debt (Purpose):  
Consultants - LegalMailing Address 98 Alexandria Pike  
Suite 53City State ZIP Code  
Warrenton VA 20186

Outstanding Balance Beginning This Period

7912.23

Transaction ID: SD12.274159

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7912.23

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
JPMS Cox, PLLCNature of Debt (Purpose):  
Accounting & Compliance  
FeesMailing Address 11300 Cantrell Road  
Suite 301City State ZIP Code  
Little Rock AR 72212

Outstanding Balance Beginning This Period

66056.72

Transaction ID: SD12.266187

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

66056.72

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Top Kick ProductionsNature of Debt (Purpose):  
Travel - CharterMailing Address 12 Greenway Plaza  
8th FloorCity State ZIP Code  
Houston TX 77046

Outstanding Balance Beginning This Period

47140.40

Transaction ID: SD12.274238

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

47140.40

1) **SUBTOTALS** This Period This Page (optional).....

121109.35

2) **TOTALS** This Period (last page this line number only).....

121109.35

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

121109.35